

'Medical administration in the South African War, being a report of speeches delivered by Sir William Church, President, R.C.P., London, Sir William MacCormac, President, R.C.S., England, and Surgeon General J. Jameson, late Director General, Army Medical Services, at a complimentary dinner given to the latter by the Medical Profession of Great Britain and Ireland, on the 24 July 1901'

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THE LATE DIRECTOR-GENERAL, A.M.S.

At a meeting recently held it was determined to invite Surgeon-General Jameson, C.B., to a complimentary dinner offered to him by his professional brethren.

Surgeon-General Jameson has acted as Director-General of the Army Medical Department for the past five years, and has had to discharge during that period duties involving the greatest responsibility, especially in connection with the medical requirements of the war in South Africa.

Sir William S. Church (President of the Royal College of Physicians) has consented to take the chair, and the dinner will probably take place towards the end of July. An Executive Committee has been appointed to make arrangements, and communications will be received by the Honorary Secretary, Mr. Cuthbert Wallace, F.R.C.S., 75, Lambeth Palace Road, S.E.

The proposal has been cordially accepted by:

The President of the Royal College of Surgeons of England (Sir William MacCormac, Bart., K.C.V.O.).

The President of the Royal College of Physicians, Edinburgh (Dr. Fraser).

The President of the Royal College of Surgeons, Edinburgh (Dr. Dunsmure).

The President of the Royal College of Physicians of Ireland (Sir Christopher Nixon).

The President of the Royal College of Surgeons in Ireland (Mr. Thomas Myles).

The President of the Faculty of Physicians and Surgeons in Glasgow (Dr. Finlayson).

The President of the General Medical Council (Sir William Turner, K.C.B.).

The Right Hon. Lord Lister	Professor McCall Anderson.
Sir Thomas Barlow, Bart., K.C.V.O.	Professor E. H. Bennett.
Sir Douglas Powell, Bart., K.C.V.O.	Mr. W. Watson Cheyne, C.B., F.R.S.
Sir Thomas Smith, Bart.	Mr. A. Bowlby, C.M.G.
Sir Joseph Fayrer, Bart., K.C.S.I.	Mr. G. Lenthal Cheatle, C.B.
Sir Frederick Treves, K.C.V.O., C.B.	Mr. C. Stonham.
Sir Batty Tuke, M.P.	Mr. G. H. Makins, C.B.
Sir Hector Cameron.	Mr. John Morgan.
Sir Dyce Duckworth.	Dr. Allchin.
Sir William Thomson, C.B.	Dr. J. Anderson.
Dr. Patrick Heron Watson.	Dr. Bowles.
Dr. Farquharson, M.P.	Mr. Alfred Cooper.
Dr. Pavy, F.R.S.	Dr. Shore.
Mr. Alfred Willett.	Mr. Edmund Owen.
Mr. Langton.	Dr. Philip Frank.
Mr. H. T. Butlin.	Mr. Reginald Harrison.
Mr. Howard Marsh.	Professor D. J. Cunningham, F.R.S.
Professor John Chiene, C.B.	

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MEDICAL ADMINISTRATION
IN THE
SOUTH AFRICAN WAR

Being a Report of Speeches delivered

BY

SIR WILLIAM CHURCH, BART.

President of the Royal College of Physicians of London

SIR WILLIAM MACCORMAC, BART.

President of the Royal College of Surgeons, England

AND

SURG.-GENERAL J. JAMESON, C.B.

Late Director-General Army Medical Service

At a Complimentary Dinner given to the latter by the Medical
Profession of Great Britain and Ireland, on the 24th July, 1901.

LITERARY NOTES.

DR. MOTT'S Croonian Lectures on the Degeneration of the Neurone, which were published in the BRITISH MEDICAL JOURNAL at the time of their delivery in 1900, and have since been issued as a volume (John Bale, Sons, and Danielsson, Limited, London), are, we learn, being translated into German by Dr. Wallach at the suggestion of Professor Edinger, who will contribute a preface. The book will be published by Bergmann, of Wiesbaden.

Messrs. J. and A. Churchill announce a new edition of the late Dr. Carpenter's well-known book on *The Microscope and its Revelations*. Many of the chapters have been entirely rewritten, and the whole work has been reconstructed and enlarged by the Rev. Dr. Dallinger, F.R.S., who has spent many months in the task of bringing the book into line with the newest inventions and discoveries. The book was first published in 1856 as a manual of 744 foolscap 8vo pages and 296 illustrations. The eighth edition will be found to have 1,136 pages demy 8vo, and nearly 1,000 illustrations.

According to the *Indian Medical Gazette*, Dr. Hem Chandra Sen, teacher of Materia Medica at the Campbell Medical School, Calcutta, intends to bring out a quarterly medical paper devoted to Oriental medicine. His purpose is to bring before the English-speaking medical profession all that is valuable in the writings and practice of men practising Oriental methods of treatment and on indigenous drugs. The first issue, in July next, will contain an article on the treatment of the continued fevers of India, and on the use of gold and snake venom.

Among the new volumes of the Cambridge Series for Schools and Training Colleges shortly to be published by the Cambridge University Press is a *Manual of School Hygiene*, "Written for the Guidance of Teachers in Day Schools," by Dr. Edward W. Hope, Professor of Hygiene, University College, Liverpool, and Mr. Edgar A. Browne, Lecturer in Ophthalmology in the same institution.

Mr. [unclear] and Hall have just issued the *Diary of*

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Millbank,
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Received from Lieut. Scanderson
Lieut. Col. Jamieson,
P.H. Lab Service
Brighton

Nov 1953

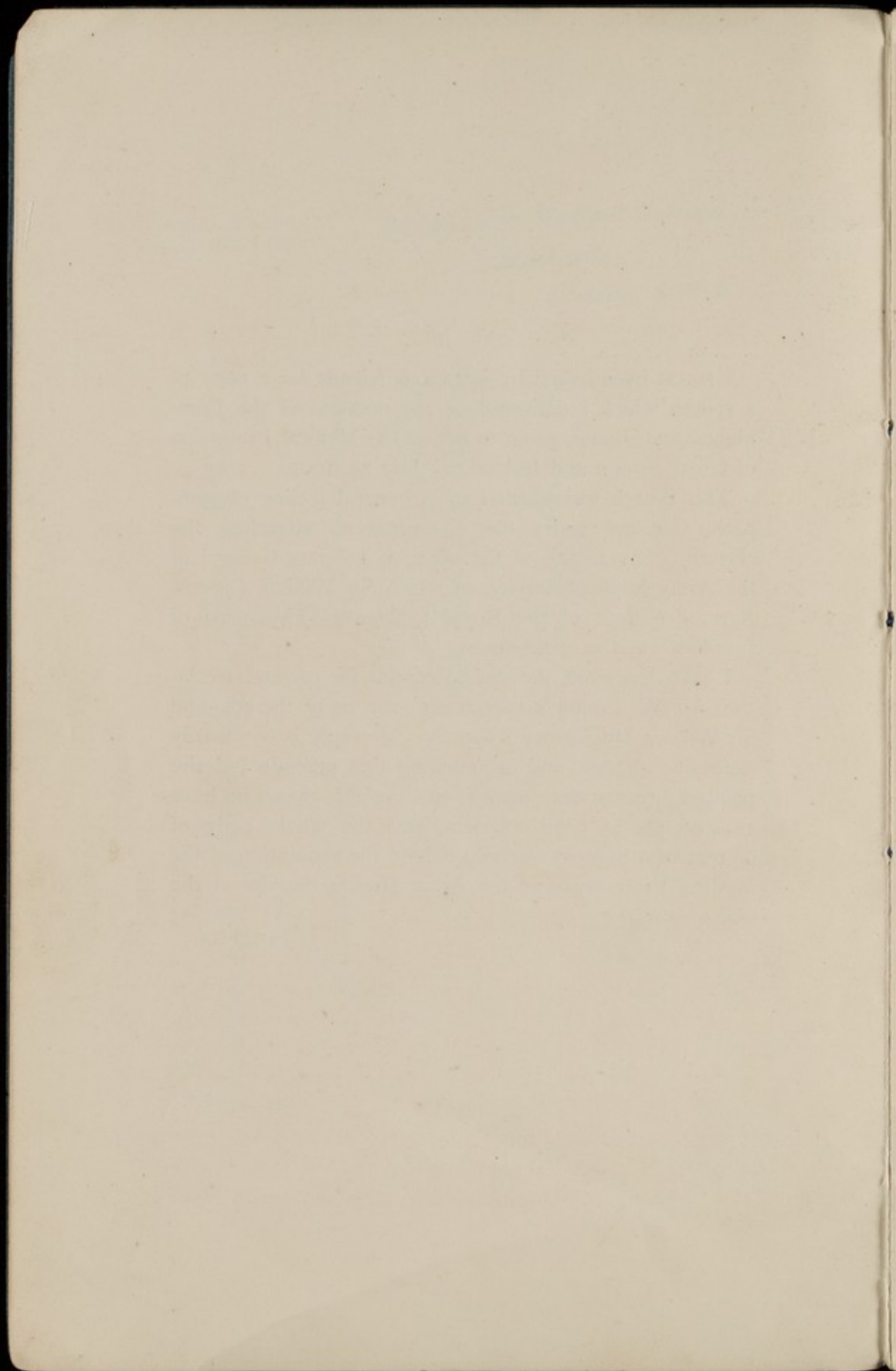
(For mini-mid-noon)

I HAVE been asked by numerous friends for a copy of a speech which I delivered on the occasion of the Complimentary Dinner, given to me by the Medical Profession of Great Britain and Ireland, on July 24, 1901.

This speech was elicited by a general feeling of sympathy for me under the circumstances attending the closure of my tenure of the office of Director-General of the Army Medical Service, of which Sir William Church, Bart., President of the Royal College of Physicians of London, was the spokesman.

I have, therefore, decided to reprint for private circulation Sir W. Church's speech and my reply thereto, and Sir William MacCormac's speech. My reply is necessarily defensive in tone, and in assuming that attitude I desire pointedly to associate myself with the able men who have assisted me at head quarters, and the whole body of officers who have so worthily upheld the reputation of the Medical Profession and the Army Medical Service at the seat of war.

J. JAMESON.



Complimentary Dinner to Surgeon-General Jameson.

AFTER the loyal toasts had been honoured, the CHAIRMAN proposed the toast of "The Guest" of the evening, and said that when a very general feeling was expressed that the long and valuable services Surgeon-General Jameson had given to the country should be publicly recognised, it very naturally took the form of a dinner. They had met to do honour to one who had deserved well both of his profession and of the country. After describing the career of Surgeon-General Jameson, the Chairman, continuing, said that in 1896 he was appointed the Director-General of the Army Medical Department. The labours and difficulties that he had had to surmount in that department were known to all. The extreme difficulty of his position, and the arduous character of his labours, put him somewhat in the position of the Israelite of old, because he was asked to make bricks without straw. The present war was unique in its character and difficulties, and never before had so many men left our shores for so great a distance. When the country realised what had to be done, and rose like one man to assist the Government, it was a much easier task for the Government to increase the forces of the country than it was for those whose duty it was to organise the departments which were absolutely necessary for the forces the country was ready to give. The general public had no idea of the difficulties of organising the hospital service of South Africa. Sur-

geon-General Jameson had said that all requirements that had been made upon him he had been able to meet, and he thought it reflected the highest possible credit both upon the Surgeon-General and upon his department. They recognised by the dinner that night, the value of a long life spent in the service of the country, and they recognised still more, the constancy with which, amidst labours of the most difficult kind, Surgeon-General Jameson stuck to his post and did good work. As civilians they also wished to acknowledge the able manner in which he had kept up the good relationship between his own corps and his civilian brethren.

Surgeon-General JAMESON in reply said:—

MR. CHAIRMAN AND GENTLEMEN,—I find some difficulty in replying to the toast, and expressing in adequate terms, my feelings of profound gratitude to the medical profession for the compliment they have paid me this evening, and through me the Royal Army Medical Corps.

It has been my fortune to have been Director-General during a very eventful period, when a strain has been put upon the Army Medical Service such as has been never put before.

The medical establishment before the war was designedly fixed for two army corps and two cavalry brigades, and it was practically exhausted in the early months of the war, and little remained for hospital duties at home. Events developed rapidly, the army was doubled, then trebled, and with each unit which embarked, a proportion of medical *personnel* and material had to be provided. Militia regiments were embodied, necessitating fresh demands upon an establishment already impoverished, and soon there began to arrive from South Africa invalids in tens, in hundreds, and in thousands. Since the beginning of the war we have received from South Africa,

India, and the Colonies, over 50,000 invalids. All of them were received and handled by us in conjunction with, and ably assisted by, the Quartermaster-General's Department. None were transferred to the Civil Hospitals; only men on furlough gained access to these, and from first to last the work was performed without a single hitch. But my critics will ask, how could you possibly attend to over 50,000 invalids together with the sick at home, when your establishment had already been expended? That, gentlemen, is the miracle I am about to describe.

At the commencement of the war the strength of the officers was somewhat below the normal establishment. For some years difficulties had been experienced in obtaining recruits by competition, and when demands were far in excess of establishment, resort had to be made to the system of nomination by colleges and medical schools. These responded readily to the requisitions which I felt compelled to make upon them, and in this manner the establishment was restored to its normal strength, and temporarily increased by 100. In addition, over 700 civil surgeons were enrolled for duty at the front, and a large number in addition were engaged for work in the hospitals at home. I desire on this occasion to acknowledge warmly the readiness with which the medical profession responded to the call. Many of the excellent men who tendered their services have done so at considerable sacrifice. I would particularly mention my obligations to Professor McCall Anderson, of Glasgow, and Professor Cunningham, of Trinity College, Dublin, for willing and effective aid in the matter. In order to recruit the rank and file, we began by calling out the Reservists or the Corps, and that gave temporary relief; then we enlisted men, and trained them as rapidly as possible. The next step was to bring home from the Colonies every man that could be spared. By these means we sent to South

Africa nearly 7,000 of our own trained men, and kept a proportion for duty at home. But a further effort had to be made, and we tapped the Militia Medical Staff Corps, which gave us 500 men, 160 of whom went on active service. Then we turned our attention to the Volunteer Medical Staff Corps and the Volunteer Infantry Brigade Bearer Companies, who responded with 600 good men. A number of our pensioners came back, and every civilian with hospital experience that we could hear of, him we employed. The institution which was the most helpful, outside of our own corps, was the St. John Ambulance Brigade, which gave us 1,900 men, and whenever help was most needed, we applied to this Brigade, and never in vain. It is true that the men for the most part had no previous ward training, but they were willing and intelligent, and with experience they became efficient nurses. The sick attendants of the Langman Hospital were all St. John's men. They suffered in a greater degree from the risks of war than any unit in the fighting line, and I state on the authority of Dr. Conan Doyle, that 75 per cent. of them contracted enteric fever. It will be seen that our difficulties at first were chiefly due to the deficiency of men of our own corps, and the question arose, who was responsible? The answer is to be found in the report of the Royal Commission appointed to consider and report upon the care and treatment of the sick and wounded in the South African Campaign, in these words: "The deficiency was not the fault of the Director-General and the staff of officers associated with him. They had for a considerable time before the outbreak urged upon the Military authorities the necessity for an increase of the corps, but for the most part without avail."

It has been asserted by a high military authority, that the trained soldier is the only article you cannot buy in the open market. This statement is, I think, a little

optimistic. You cannot buy the trained hospital orderly, because the article does not exist in any quantity. Experience in this war, on the other hand, tends to prove that a man without much military training may be a very good fighting soldier, Lord Strathcona's Horse, for example. In it many men were killed, but no man ever surrendered, and there was no one the Boers had more cause to fear than the rough, untrained, but plucky soldier from Canada, who always fought to a finish.

The deficiency of trained male attendants being acknowledged, this leads to the question, why were not more female nurses employed at the beginning of the war? The answer is simple enough. Every detail of every unit for war purposes is carefully worked out in times of peace. This was done by a committee in which all branches of the War Office were represented, and a scheme was drawn up which met with the approval of the Commander-in-Chief, and was given to us for our information and guidance, showing so many medical officers of different ranks in the unit, so many quartermasters, warrant officers, non-commissioned officers and men, and so many female nurses. It was not business to give up at once a scheme so carefully prepared. I therefore adhered to it so long as trained men could be provided, and when no more were available, we employed female nurses in ever increasing numbers, and over 800 have gone out to the seat of war, while many are employed at home. It may be stated, however, that in no other European army has such a liberal provision been made. I have much pleasure in stating that it is to Her Majesty the Queen, and to Her Royal Highness the Princess Christian, that we are indebted for the supply of such a number of highly trained and competent nurses. The Army Nursing Reserve was the creation of Her Royal Highness the Princess Christian. The nurses were selected with great

care by a committee of which Her Royal Highness was president. They gave most valuable help in many instances at the sacrifice of their own lives, and the failures can be counted on the fingers of one hand.

Hitherto I have referred chiefly to the difficulties in regard to *personnel*, but as professional men and taxpayers, you may be interested in knowing what was done in reference to material.

The normal annual expenditure for medicines, &c., is about £14,000. We increased it to £198,000. The whole medical vote, excluding the non-effective vote in normal times, is about £300,000 a year. Last year we spent over a million. Since the war began we have sent out 4,000 shipping tons of medicines and surgical material. We have mobilised 151 staff and regimental units, 19 bearer companies, 28 field hospitals, 5 stationary hospitals, 16 general hospitals, 2 hospital ships, 3 hospital trains, 3 advance, and 2 base depôts of medical stores. In addition, many units were organised in South Africa with men and material provided from home. Among the stores sent out were 19 X-ray apparatus and outfit for 4 dental surgeons. Over and above these we have provided large quantities of material for the use of the China Field Force.

In a recent telegram, the principal medical officer in South Africa reported that he had nearly 21,000 hospital beds equipped, exclusive of the accommodation in field hospitals, and of that number only 600 beds are in private hospitals.

When one recalls that the grand total of hospital accommodation in London is only some 30,000, and that that figure not only includes the numerous small hospitals, the great general hospitals, but the hospitals of the Metropolitan Board and the Poor Law Infirmaries, I think the magnitude of our undertaking will be realised.

The assistance given us by the private hospitals organised in this country for war service, was most opportune. These hospitals were splendidly equipped, and the nation owes a deep debt of gratitude to all those who gave so bountifully of their means, their time, and their services. They were the Yeomanry, the Portland, the Langman, the Moseley, the Van Allen, the Irish, and the two Scottish hospitals. Nor must it be forgotten that one of the most perfect medical units was sent from New South Wales.

It is not, I think, very well understood by some of our critics what our responsibilities are as regards supply. Food and so-called hospital comforts are supplied on requisition by the Army Service Corps, while all hospital equipment, beds, blankets, mattresses, hospital clothing, utensils, furniture, &c., are, or should be, provided by the Ordnance Department, and when you hear of such things being wanting, the blame, if any, does not rest with us. It is true that we were compelled at Bloemfontein to commandeered things, and this was done extensively, because there was not a single ordnance store officer present until ten days after its occupation. Then as regards ablution arrangements and the washing of hospital clothing, if unsatisfactory, the blame should not have been cast upon the Medical Department. Again, we were criticised for defective sanitary arrangements in the field, in face of the fact that the post of sanitary officer had been abolished against medical advice, and the over-worked principal medical officers had to be their own sanitary officers. The selection of sites for camps and hospitals is a duty devolving upon the Quartermaster-General's Department, and expert advice may or may not be asked, or it may be ignored. And in respect to taking over buildings for temporary hospitals, in no instance, as far as I am aware, was any building taken over by the Barrack Department

or the Royal Engineers, the very department organised for the purpose. The Royal Army Medical Corps from necessity, not only had to take over buildings, but also in numerous instances, undertake structural alterations and equipment at a time when their services were urgently needed in their own sphere.

The care of the sick and wounded, if conducted on humanitarian principles in the future, will require an enormous increase of transport, and this is what never will be given, or if given, it is certain to be taken away in favour of food and ammunition when the necessity arises. Lord Roberts, in his evidence before the Royal Commission, stated that, for a whole month at Bloemfontein, he had not a single day's food in the larder, that he was dependent for his supplies on a single line of railway cut in places, and the enemy close down on the frontier of Cape Colony. Any accident or serious reverse would have cut him off from his supplies altogether. Is it likely, then, that the chief of the staff, with starvation staring him in the face, would give much heed to the supply of hospital utensils? Lord Roberts' evidence, is, in my opinion, a complete answer to every complaint.

The confidential reports by general officers upon our officers on active service, are almost, without exception, most flattering, and it is a pity that such reports are treated so confidentially. Zeal, devotion to duty, good professional work, are the characteristic features described. It is to be hoped then, that with a better knowledge of character, the estrangement which has unhappily existed for some time between combatant and medical officers, and which has found expression in a social direction, will disappear. It is to the medical service, rather than to individuals, that this unfriendly feeling is displayed, and this is generally looked upon as a protest by combatant officers of junior rank, against the abolition of the regi-

mental system of which they have had no experience; or perhaps it is the protest against the creation of a Royal Corps with rank and titles equal to their own. If so, it it is not in accordance with the best traditions of the English officer. Personally, I have no cause to complain, and never had, my oldest and dearest friends are combatant officers. In my five years' service in the War Office as Director-General, nothing could exceed the kindness and courtesy shown me on all occasions by all the officers of the headquarter's staff, and conspicuous in urbanity has been the Adjutant-General, Sir Evelyn Wood.

But the medical department is looked upon as a kind of excrescence of the War Office. It is not upon the same equality as that of the Royal Engineers, for example. The Director-General, unlike the Inspector-General of Fortifications, is not a member of the War Office Council, presided over by the Secretary of State, or of the Army Board, presided over by the Commander-in-Chief. He attends their meetings when summoned, but subjects concerning his department may be discussed in his absence, and as has sometimes happened, he may get a knowledge of their decisions after some delay. There are few subjects, I imagine, discussed, in which the health and comfort of the soldier is not directly or indirectly concerned, and when one considers that in war disease is always more fatal than gunshot, and that a tenth part of the army is every day under the command of the Medical Department, the wisdom of the Director-General's exclusion from these Boards is not apparent.

A short time ago I was present at a complimentary dinner given to two distinguished gentlemen who were vacating their appointments in the War Office. There was much after dinner speaking, and much praise was bestowed on individuals in the various branches, and I have no doubt deservedly. There was much praise of the

*Lord
Lansdowne*

Military Secretary's branch, Adjutant-General's branch, Quartermaster-General's branch, Ordnance branch, Royal Engineers, Financial branch, Contracts' branch, and of clerical work generally, but from first to last no mention was made of the Medical branch, and when I think of it, nor of the Chaplain's department either, from which it may be inferred that the care of souls and bodies is not held of much account in Pall Mall.

During the war, no general officer has equalled Sir Redvers Buller in the generous expression of his appreciation of the work done by the Army Medical Service. I remember well the first interview I had with him after my appointment, for it characterises the man. After some conversation, he said: "Before you go let me give you a bit of advice. It is this, whoever opposes you, never mind who it is, high or low, stand up for your own department." Gentlemen, I followed that advice, as men usually follow advice which agrees with their own inclinations. I acknowledge there has been an abundance of opportunity given me for standing up, and when our officers and men, after superhuman efforts on their part, find themselves subjected to criticism and to an enquiry such as has not been applied to any other part of the army, and to blame which others should bear, it is not surprising that in all ranks of our Corps the idea prevails that justice has not been done. And the sympathy which others have denied, but which you have shown by your presence here this evening, will be all the more esteemed.

I sincerely trust that in the changes which are under consideration, by a committee in which, by the way, the Medical Department is but feebly represented in numbers and voting power, our organisation may not be disturbed. It was developed by that liberal-minded statesman, Lord Lansdowne. It is prized by us, and has created *esprit de corps*, stimulating us to work up to our motto, "*In arduis*

fidelis." The most urgent want now, and for years past, is an increase in the *personnel*, and given that increase, leave for study, and a due proportion of home service will become possible, but to obtain that increase the service must be made more attractive in one way or another. Even with the difficulties that existed in South Africa, which I have attempted to describe—and they were mainly due to military exigencies—I take consolation from the conclusion of the Royal Commissions' report: "And all witnesses of experience in other wars are practically unanimous in the view, that taking it all in all, in no campaign have the sick and wounded been so well looked after as they have been in this." That is the verdict given after an exhaustive trial, and when the history of the war is written, that verdict, I am convinced, will be upheld.

Sir WILLIAM MACCORMAC, in proposing the toast of "The Public Medical Services," observed that it seemed to be a matter of course that after every war an enquiry into the medical arrangements should be held. The Royal Commission sent to South Africa had found some minor defects, but on the whole its report was most favourable. But incompetent critics were not satisfied, and the effect of the injustice with which the service had been treated was shown by the fact that there was at the present moment not a single candidate applying for admission to His Majesty's Medical Service. He thought it was impossible to say too much in the way of admiration of how Surgeon-General Jameson had met every requirement that had been made on him, and it seemed to him passing strange that the Government had allowed that man to leave the ranks of the army, not only without the customary recognition given to every one of his predecessors, but also without one word of thanks, or one line of acknowledgment.

